

UNITED STATES TIES AND EXCHANGE COMMISSION Washington, D.C. 20549 F SECURITIES 4(6), AND/OR

391479 OMB APPROVAL

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SEC	USE O	NLY
Prefix		Serial
DA	TE RECEIV	ED

UNIFUR	M LIMITED OFFERING EXEMP	TION
Name of Offering ( check if this is an amendmen	nt and name has changed, and indicate change.)	
Private Placement of up to \$ 250,000,000.00*	of limited partnership interests of KH Grow	vth Equity Fund, L.P.
	•	
Type of Filing: New Filing Amendment		Will the true sure con-
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		5309
Name of Issuer ( check if this is an amendment a	nd name has changed, and indicate change.)	07065399
KH Growth Equity Fund, L.P.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
11726 San Vicente Boulevard, Suite 300, Los	Angeles, CA, 90049	(310) 442-4700
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Private equity investment fund formed for the	purpose of making investments in equity and	I debt securities of companies.
• •		<del>PROCESSED</del>
Type of Business Organization		
		ease specify):
business trust limited	partnership, to be formed	MAY 29 2007
	Month Year	
Actual or Estimated Date of Incorporation or Organiza		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Jurisdiction of Incorporation or Organization: (Enter		-J-INAINUIAL
	or Canada; FN for other foreign jurisdiction)	DE
GENERAL INSTRUCTIONS		
Federal:		
Who Must File: All issuers making an offering of securi	ties in reliance on an exemption under Regulation D of	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

SEC 1972 (6-02)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

				A. BASIC IDE	ENTH	FICATION DATA				
2. Er	nter the information re	equested for the fol	lowing:							
•	Each promoter of	the issuer, if the iss	uer has b	een organized w	ithin t	the past five years;				
•	Each beneficial ow	ner having the pow	er to vote	or dispose, or dir	ect the	e vote or disposition (	of, 109	% or more o	f a clas	s of equity securities of the issue
•	Each executive of	ficer and director o	f corporat	te issuers and of	corpo	rate general and man	aging	partners of	partne	ership issuers; and
•	Each general and i	managing partner o	f partners	ship issuers.						
Check	Box(es) that Apply:	<b>★</b> Promoter	Ве	neficial Owner		Executive Officer		Director	×	General and/or Managing Partner
Full Na	me (Last name first,	if individual)								
	th Equity Advisors	,								
	ss or Residence Addre	<u>*</u>	Street, Ci	itv. State, Zip Co	ode)	·				
	San Vicente Boul									
Check	Box(es) that Apply:	Promoter	Ве	neficial Owner		Executive Officer		Director	W	General and/or Managing Partner
Full Na	me (Last name first,	if individual)								
KH G	rowth Equity Advi	isors, LLC**								
Busines	ss or Residence Addre	ess (Number and	Street, Ci	ity, State, Zip Co	de)					
11726	San Vicente Boul	evard, Suite 300	, Los Ai	ngeles, CA, 90	049					
Check	Box(es) that Apply:	Promoter	☐ Be	neficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Na	me (Last name first,	if individual)				-		•		·
Josepl	h E. Ferguson***									
	ss or Residence Addre	•		ity, State, Zip Co						
11726	San Vicente Boul	evard, Suite 300	, Los Ar	ngeles, CA, 90	049					
Check	Box(es) that Apply:	■ Promoter	Ве	neficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Na	me (Last name first,	if individual)				±				
Nicho	olas Memmo***									
Busines	ss or Residence Addre	ess (Number and	Street, Ci	ity, State, Zip Co	ode)	- 1				
11726	San Vicente Boul	evard, Suite 300	, Los Ar	ngeles, CA, 90	049					
Check	Box(es) that Apply:	■ Promoter	□ Ве	neficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Na	ime (Last name first,	if individual)								
Klaus	Koch***									
Busine	ss or Residence Addre	ess (Number and	Street, C	ity, State, Zip Co	ode)					
11726	San Vicente Boul	evard, Suite 300	, Los Ar	ngeles, CA, 90	049					
Check	Box(es) that Apply:	Promoter	□ Ве	eneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Na	ame (Last name first,	if individual)					-			
Busine	ss or Residence Addre	ess (Number and	Street, C	ity, State, Zip Co	ode)					
Check	Box(es) that Apply:	Promoter	Ве	eneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Na	ame (Last name first,	if individual)								
Busine	ss or Residence Addre	ess (Number and	Street, C	ity, State, Zip Co	ode)					
	ral Partner of the Issuer eral Partner of Growth	•		••	additi 2 of	onal copies of this sl	heet, a	is necessary	/)	

\*\*\* Officer of KH Growth Equity Advisors, LLC, general partner of the general partner of the Issuer

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В. І	NFORMATI	ON ABOU	T OFFERI	NG				
_					_						•	Yes	No
1.	Has the	issuer solo	l, or does th							_			×
						Appendix,		-					*
2.	What is	the minim	um investn	ent that w	ill be acce	pted from a	ny individ	ual?	• • • • • • • • • • • • • • • • • • • •			\$_1,000	00.000,0
3.	Does the	e offering	permit join	t ownershi	p of a sing	le unit?						Yes <b>≭</b>	No □
4.											irectly, any	_	_
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								with a state		į		
			first, if indi	ividual)								·	
		rtners, Inc											
			Address (N : 308, Orin			ity, State, Z	ip Code)						
			oker or De		+303								
			y, Berry &										
			Listed Has		or Intends	to Solicit I	urchasers						<del>-</del>
	(Check	"All States	or check	individual	States)								States
	[AL]	ĀK	AZ	AR	GA	CO	CT	DE	DC	FL	GA	НІ	ĪD
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	$\overline{MT}$	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	Ψſ	WY	PR
Ful	l Name (I	ast name	first, if indi	ividual)									
	arle & Co		11130, 11 1110										
			Address (1	Number an	d Street, C	ity, State, 2	Lip Code)						•
_			ue, Greenv		06830								
Nar	ne of Ass	ociated Br	oker or De	aler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
Ju											<b>,,,,</b>	r⊒i Al	l States
	(Check	An States	or eneck	mairiadai	Diares)	***************************************	***************************************		,.,.,		•••••	<u>.</u>	i Biates
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	MT	NE	NV	ŇĤ	NJ	NM)	NY	NC	ND	OH OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT]	VT	VA	WA	WV]	WI	WY	PR
Ful	l Name (l	Last name	first, if ind	ividual)		•							
		pital Mark	<u> </u>										
			Address (1			-	Lip Code)						
			Suite 1050 oker or De		1L 60603								<del>:</del>
		ociated Bi pital Mark		aier									
			Listed Has	s Solicited	or Intends	to Solicit I	urchasers						
			s" or check							••••		₩ AI	l States
	AL	[AK]	AZ	ĀR	CA	CO	[CT]	DE	(DC)	FL	GA	HI	[ID]
		IN]	IA	[KS]	KY]	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

_	OCCUPATION AND AND AND AND AND AND AND AND AND AN	*****	04			
Ι.	OFFERING PRICE	NUMBER	OF INVESTORS	FYPENSES	AND HEF	OF PROCECT

	already exchanged.  Type of Security		regate ng Price	Amount Already Sold
	Debt	\$ 0.00		\$ 0.00
	Equity			\$ 0.00
	□ Common □			<u> </u>
	Convertible Securities (including warrants)			<b>\$</b> 0.00
	Partnership Interests		00.000,000	·
	Other (Specify)			\$ 0.00
	Total		00,000.00	\$ 98,150,000.00
	Answer also in Appendix, Column 3, if filing under ULC			3_70,150,000.00
2.	Enter the number of accredited and non-accredited investors who have proffering and the aggregate dollar amounts of their purchases. For offering the number of persons who have purchased securities and the aggregate purchases on the total lines. Enter "0" if answer is "none" or "zero."	s under Rule 504, indicate		Aggregate
		Inve	nber estors	Dollar Amount of Purchases
	Accredited Investors			\$ 98,150,000.00
	57 17 17	NI/A		ω N/Δ
	Non-accredited Investors			\$_N/A
3.	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Ula If this filing is for an offering under Rule 504 or 505, enter the information in	N/A ULOE.		\$ N/A
3.	Total (for filings under Rule 504 only)	ULOE. requested for all securities e (12) months prior to the		
3.	Total (for filings under Rule 504 only)	ULOE. requested for all securities e (12) months prior to the in Part C — Question 1.	pe of urity	
3.	Total (for filings under Rule 504 only)	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Typ Secu	pe of urity	\$ N/A . Dollar Amoun
3.	Total (for filings under Rule 504 only)	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Typ Secu		\$ N/A  Dollar Amoun
3.	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Use If this filing is for an offering under Rule 504 or 505, enter the information a sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed Type of Offering  Rule 505  Regulation A	VLOE. requested for all securities e (12) months prior to the in Part C — Question 1.  Typ Secu N/A N/A		\$ N/A  Dollar Amoun Sold \$ N/A
3.	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Use If this filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed Type of Offering  Rule 505  Regulation A  Rule 504	N/A  ULOE. requested for all securities e (12) months prior to the in Part C — Question 1.  Typ. Secu. N/A  N/A  N/A	urity	S N/A  Dollar Amoun Sold S N/A N/A
3.	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Use If this filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed Type of Offering  Rule 505  Regulation A  Rule 504	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Typ Secu N/A  N/A  N/A  N/A  N/A  N/A  ce and distribution of the on expenses of the insurer.  mount of an expenditure is	urity	S N/A  Dollar Amoun Sold  S N/A  N/A  N/A  N/A  N/A
	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Use If this filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed is Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organization. If the armonic in the first subject to future contingencies. If the armonic in the subject is the subject to future contingencies.	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Type Security Secu	urity	S N/A  Dollar Amoun Sold S N/A S N/A S N/A
	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Use If this filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed is Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuand securities in this offering. Exclude amounts relating solely to organization The information may be given as subject to future contingencies. If the armot known, furnish an estimate and check the box to the left of the estimate and check the box to the left of the estimate and check the securities in the securities in the estimate and check the securities in the estimate and check the box to the left of the estimate and check the securities in the securities in the estimate and check the securities in the securities in the estimate and check the securities in the estimate and check the securities in the estimate and check the securities in the securities in the estimate and check the securities in the securities in the estimate and check the securities in th	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Type Security Secu	<b>x</b>	S N/A  Dollar Amoun Sold S N/A S N/A S N/A S N/A
	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Ulfthis filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed is Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organization The information may be given as subject to future contingencies. If the armot known, furnish an estimate and check the box to the left of the estime Transfer Agent's Fees	N/A  ULOE. requested for all securities e (12) months prior to the in Part C — Question 1.  Typ Secu N/A  N/A  N/A  N/A  N/A  N/A  N/A  on expenses of the insurer. mount of an expenditure is state.	x	\$ N/A  Dollar Amoun Sold  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A
	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Use If this filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organization The information may be given as subject to future contingencies. If the armoteknown, furnish an estimate and check the box to the left of the estime Transfer Agent's Fees  Printing and Engraving Costs	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Type Security Secu	N	\$ N/A  Dollar Amoun Sold  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ Solution of the second
	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Ulfthis filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed is Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organization The information may be given as subject to future contingencies. If the armoteknown, furnish an estimate and check the box to the left of the estime Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees	N/A  ULOE. requested for all securities e (12) months prior to the in Part C — Question 1.  Typ Secu N/A N/A N/A N/A N/A N/A oce and distribution of the on expenses of the insurer. mount of an expenditure is tate.	x x x	\$ N/A  Dollar Amoun Sold  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ Sold  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A
	Total (for filings under Rule 504 only)  Answer also in Appendix. Column 4, if filing under Ula If this filing is for an offering under Rule 504 or 505, enter the information is sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed in Type of Offering  Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organization. The information may be given as subject to future contingencies. If the armoteknown, furnish an estimate and check the box to the left of the estime. Transfer Agent's Fees  Printing and Engraving Costs	N/A  ULOE.  requested for all securities e (12) months prior to the in Part C — Question 1.  Typ. Secu. N/A  N/A  N/A  N/A  N/A  ce and distribution of the on expenses of the insurer. mount of an expenditure is sate.	× ×	\$ N/A  Dollar Amoun Sold  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ N/A  \$ Sold  \$ N/A

investments in the Issuer. The amounts noted above reflect the entire \$50,000,000 as having been sold.

<sup>\*</sup> The General Partner reserves the right to offer a greater amount of limited partnership interests.

<sup>\*\*\*</sup> Placement agent fees are offset dollar for dollar against management fees payable by the Issuer. The payment of such fees by the Issuer will not involve any additional expenditure of funds by the Issuer.

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	C. OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSES AND USE OF P	ROCEEDS	······································
	b. Enter the difference between the aggregate offering price and total expenses furnished in response to Part C — Question proceeds to the issuer."	4.a. This difference is the "adjusted gross		\$_249,250,000.00
5.	Indicate below the amount of the adjusted gross proceed to the each of the purposes shown. If the amount for any purpose check the box to the left of the estimate. The total of the paym proceeds to the issuer set forth in response to Part C — Qu	e is not known, furnish an estimate and tents listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			○¥ \$ 0.00
	Purchase of real estate	[	× \$_0.00	× \$_0.00
	Purchase, rental or leasing and installation of machinery and equipment	1	<b>⊋ \$</b> 0.00	<b>■</b> \$ 0.00
	Construction or leasing of plant buildings and facilities			\$ 0.00
	Acquisition of other businesses (including the value of seconfering that may be used in exchange for the assets or secons issuer pursuant to a merger)	arities of another	• \$_0.00	\$ 215,250,000.00
	Repayment of indebtedness			* \$ 4,000,000.00
	Working capital		\$ 0.00	* \$ 0.00
	Other (specify):	[	\$_0.00	\$ 0.00
			• \$_0.00	■ \$ <u>0.00</u>
	Column Totals	· ·[	\$ 30,000,000.00	* \$_219,250,000.00
	Total Payments Listed (column totals added)	-		9,250,000.00
	D. FE	DERAL SIGNATURE		<del></del>
sig	e issuer has duly caused this notice to be signed by the undersig nature constitutes an undertaking by the issuer to furnish to th information furnished by the issuer to any non-accredited in	e U.S. Securities and Exchange Commis	sion, upon writter	
Iss	uer (Print or Type) Signatu	re 1	Date	,
- KJ	H Growth Equity Fund, L.P.	gory	21/3	167
Na	me of Signer (Print or Type)	Signer (Print of Type)		
Jo	seph E. Ferguson Manager	of Growth Equity Advisors, LLC, the General	Partner of Growth	•

## — ATTENTION ———

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE		
٦.	* * *	resently subject to any of the disqualification	Yes	No •
	See	Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as requir	furnish to any state administrator of any state in which this notice is fed by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	o furnish to the state administrators, upon written request, informat	ion furn	ished by the
4.	limited Offering Exemption (ULOE) of the s	ssuer is familiar with the conditions that must be satisfied to be ent tate in which this notice is filed and understands that the issuer clai hing that these conditions have been satisfied.		
	ner has read this notification and knows the cont thorized person.	ents to be true and has duly caused this notice to be signed on its beha	lf by the	undersigned
Issuer (	Print or Type)	Signature	-	<del></del>
KH Gr	owth Equity Fund, L.P.	(heg In 2/13	15	7-
Name (	Print or Type)	Title (Print or Type)		
Joseph	E. Ferguson	Manager of Growth Equity Advisors, LLC, the General Partner of Growth Equity Advisors, L.P., the General Partner of the Issuer		•

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	•			AI	PPENDIX				
1	Intend to non-a investor	2 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of security and aggregate offering price offered in state  Type of investor and amount purchased in State			under Sta (if yes, explana	ification ate ULOE attach ation of granted)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
AK		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ΑZ		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
AR		X	Up to \$ 250,000,000,00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
CA		X	Up to \$ 250,000,000.00 in limited partnership interests*	2	\$60,000,000.00*	*0	\$0.00		X
со		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
CT		X	Up to \$ 250,000,000.00 in limited partnership interests*	2	\$8,000,000.00	0	\$0.00		X
DE		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
DC		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
FL		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
GA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
НІ		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ID		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
IL		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
IN		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
IA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
KS		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
KY		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
LA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ME		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
MD		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
MA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
MI		×	Up to \$ 250,000,000.00 in fimited partnership interests*	0	\$0.00	О	\$0.00		X

Up to \$ 250,000,000 00 in limited partnership interests\*

Up to \$ 250,000,000,00 in limited partnership interests\*

0

0

MN

MS

\$0.00

\$0.00

0

0

\$0.00

\$0.00

<sup>\*</sup> The General Partner reserves the right to offer a greater amount of limited partnership interests.

<sup>\*\*</sup> One of the investors in California has subscribed for \$50,000,000 in limited partnership interest, subject to a maximum percentage of the overall investments in the Issuer. The amounts noted above reflect the entire \$50,000,000 as having been sold.

# APPENDIX

1		2	3			4		5 Disqual	ification
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
				Number of		Number of Non-Accredited			
State	Yes	No		Accredited Investors	Amount	Investors	Amount	Yes	No
МО		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
мт		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00	·	X
NE		X	Up to \$ 250,000,000,00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
NV		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
NH		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ИЛ		X	Up to \$ 250,000,000 00 in limited partnership interests*	Ō.	\$0.00	0	\$0.00		X
NM		Х	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
NY		X	Up to \$ 250,000,000.00 in limited partnership interests*	5	\$15,150,000.00	0	\$0.00		X
NC		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ND		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ОН		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
ок		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
OR		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
PA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
RI		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
SC		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
SD		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
TN		X	Up to \$ 250,000,000 00 in limited partnership interests*	0	0.00	0	\$0.00		X
TX		X	Up to \$ 250,000,000 00 in limited partnership interests*	1	\$15,000,000.00	0	\$0.00		X
UT		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
VT		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
VA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
WA		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
wv		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X
WI		X	Up to \$ 250,000,000,00 in limited partnership interests*	0	\$0.00	0	\$0.00		X

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<sup>\*</sup> The General Partner reserves the right to offer a greater amount of limited partnership interests.

				APP	ENDIX					
1	Intend to non-a investor	2 I to sell accredited s in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and ex amount purchased in State was (Part C-Item 2)		Type of investor and				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X	
PR		X	Up to \$ 250,000,000.00 in limited partnership interests*	0	\$0.00	0	\$0.00		X	



<sup>\*</sup> The General Partner reserves the right to offer a greater amount of limited partnership interests.